



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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BIBDATASHEET**CONFIRMATION NO. 1286**

Bib Data Sheet

SERIAL NUMBER 09/731,066	FILING DATE 12/06/2000 RULE	CLASS 707	GROUP ART UNIT 2175	ATTORNEY DOCKET NO. 1024-034
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APPLICANTS

Christopher P. Townsend, Shelborne, VT;
Steven W. Arms, Williston, VT;

** CONTINUING DATA ***** *SL YES*
This appln claims benefit of 60/169,364 12/06/1999

** FOREIGN APPLICATIONS ***** *SL NO*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 06/26/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY VT	SHEETS DRAWING 5	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 2
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ADDRESS
26542
JAMES MARC LEAS
37 BUTLER DRIVE
S. BURLINGTON, VT
05403

TITLE
Data collection and storage device

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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Bib Data Sheet

CONFIRMATION NO. 1286

SERIAL NUMBER 09/731,066	FILING DATE 12/06/2000 RULE	CLASS 340	GROUP ART UNIT 2632	ATTORNEY DOCKET NO. 1024-039
APPLICANTS Christopher P. Townsend, Shelborne, VT; Steven W. Arms, Williston, VT;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/169,364 12/06/1999				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/26/2001				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY VT	SHEETS DRAWING 5	TOTAL CLAIMS 39
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 2		
ADDRESS 26542				
TITLE Data collection and storage device				
FILING FEE RECEIVED 526	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	